

Effective on 12/08/04 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">For FY 2005</h2>		Complete if Known															
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td style="width: 50%;">10/036,920</td> </tr> <tr> <td>Filing Date</td> <td>December 21, 2001</td> </tr> <tr> <td>First Named Inventor</td> <td>Victoria E. Milton</td> </tr> <tr> <td>Examiner Name</td> <td>Dillon J. Murphy</td> </tr> <tr> <td>Art Unit</td> <td>2624</td> </tr> <tr> <td>Attorney Docket No.</td> <td>177744.01</td> </tr> <tr> <td>Express Mail Label No.</td> <td>N/A</td> </tr> </table>		Application Number	10/036,920	Filing Date	December 21, 2001	First Named Inventor	Victoria E. Milton	Examiner Name	Dillon J. Murphy	Art Unit	2624	Attorney Docket No.	177744.01	Express Mail Label No.	N/A
Application Number	10/036,920																
Filing Date	December 21, 2001																
First Named Inventor	Victoria E. Milton																
Examiner Name	Dillon J. Murphy																
Art Unit	2624																
Attorney Docket No.	177744.01																
Express Mail Label No.	N/A																
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">TOTAL AMOUNT OF PAYMENT</td> <td style="width: 50%;">(\$) 0.00</td> </tr> </table>		TOTAL AMOUNT OF PAYMENT	(\$) 0.00														
TOTAL AMOUNT OF PAYMENT	(\$) 0.00																
METHOD OF PAYMENT (check all that apply)																	
<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ </div> <div> <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 50-0463 Deposit Account Name: MICROSOFT CORPORATION </div> </div> <p>For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)</p> <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 </div> <div> <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Credit any overpayments </div> </div> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p>																	
FEE CALCULATION																	
1. BASIC FILING, SEARCH, AND EXAMINATION FEES																	
FILING FEES	SEARCH FEES	EXAMINATION FEES															
Small Entity	Small Entity	Small Entity															
Application Type	Fee (\$)	Fee (\$)	Fees Paid (\$)														
Utility	300	150	0														
Design	200	100															
Plant	200	100															
Reissue	300	150															
Provisional	200	100	0														
2. EXCESS CLAIM FEES																	
Fee Description	Fee (\$)	Small Entity Fee (\$)															
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25															
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100															
Multiple dependent claims	360	180															
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)														
21	- 43 or HP= 0	x 50	= 0														
HP = highest number of total claims paid for, if greater than 20																	
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)														
3	- 5 or HP= 0	x 200	= 0														
HP = highest number of independent claims paid for, if greater than 3																	
3. APPLICATION SIZE FEE																	
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).																	
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)														
-100 = 0	/ 50 = 0	(round up to a whole) number x	250 = 0														
4. OTHER FEE(S)																	
			Fees Paid (\$)														
Non-English Specification, \$130 fee (no small entity discount)			0														
Other: _____			0														
SUBMITTED BY																	
Signature		Registration No. (Attorney/Agent) 37,773	Telephone (425) 705-3539														
Name (Print/Type)	James Banowsky	Date January 6, 2006															